Name In Full

Certificate of Death

Basil Athey

Died at Town Roberts Station County Queen Anne MARYLAND

Date 189 9 Month 1 Day 24 | Age Y. 85 M. D. | Native of | Occupation

Male ~~Female~~ | White Colored | ~~Married~~ ~~Single~~ Widow Widower | Divorced | Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death — Primary: La Grippe 9 — How long sick

Immediate: — Accident, Suicide, Homicide

Reported by Courier 1-24

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 75888

Name in Full: Mary Bond

Certificate of Death

Died at: Town: Q. A. Co. County: Md. MARYLAND

Date 189 9 Jany 5 (Month Day) | Age Y. 15 M. D. | Native of Q. A. Co. | Occupation Child

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ Divorced

Female Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~of~~ ~~Wife~~

Father's Name: Sandy Bond

Mother's Name: Mary Bond

Cause of Death: Primar 118

Immediate: Child first

How long sick: One day

~~Accident, Suicide, Homicide~~

Reported by: Dawson & Whitely

Address: Centreville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full

Certificate of Death

Walter Brooks

Died at Town: Near Centreville County: Queen Anne MARYLAND

Date 1899 Month Day: Jan 13 Age Y. M. D.: 20 about Native of: Md. Occupation: Farmhand

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name: James Brooks Mother's Name: Blake

Cause of Death: Primary: Griffe 9 How long sick: 7 days

Immediate: Being moved about 10 miles over hard frozen ground during inclement weather. ~~Accident, Suicide, Homicide~~

Reported by: Walter H. Fenby

Address: Ruthsburg, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full Mary Clark

Certificate of Death

Town Church Hill County Qa

Died at MARYLAND

Date 1897 Month 1 Day 22 Age Y. 77 M. 9 D. 7

Native of Md Occupation ———

~~Male~~ Female White ~~Colored~~ ~~Married~~ ~~Single~~ Widow ~~Widower~~ ~~Divorced~~

Number of children living 3

Husband of Wife Ira Clark

Father's Name Phillips Mother's Name ———

Cause of Death: Primary Consumption 22a How long sick 3 mo.

Immediate

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by J K Brown Undertaker

Address Church Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

OVER

LIBRARY BUREAU. 65968

Attended by Dr. G H W G Weedon 4-25

of Church Hill never reports any cases whatever -

Seen by Coroner

of

Information contained in this certificate

ceived from Ira Clark & Wm Clark

of Church Hill Md.

Name in Full

Certificate of Death

May Coursey

Died at Town Centreville County Queen Anne MARYLAND

Date 1898 Month 1 Day 1 Age Y. 19 M. D. Native of Occupation

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Wm. T. Coursey

Mother's Name

Cause of Death Primary Paralysis 44

Immediate

How long sick

Accident, Suicide, Homicide

Reported by Centreville Record 1-7

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Centreville M. E. Church

Revs. Ralph. T. Coursey & E. C. Atkins.

Centreville Cemetery

Name in Full Mrs. Augustus Fleetwood

Certificate of Death

Died at Town Ruthsburg County Queen Anne's MARYLAND

Date 1899 Month 1 Day 18 Age Y. 43 M. D. Native of Occupation

~~Male~~ White Married Widow Divorced

Female ~~Colored~~ ~~Single~~ Widower Number of children living

Husband of Wife

Father's Name Mother's Name

Cause of Death Primary Paralysis 44 How long sick

Immediate Accident, Suicide, Homicide

Reported by Centreville Observer 1-19

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79[illegible]

Name in Full

Certificate of Death

Cusby J. Gardner

Died at Town: Kent Island County: Queen Anne MARYLAND

Date 1894 Month: Jan Day: 10 | Age Y.: 50 M.: 10 D.: 4 | Native of: Maryland | Occupation: Housewife

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ Widow ~~Widower~~ ~~Divorced~~ | Number of children living: two

~~Husband~~ ~~Wife~~ of Widow of Nelson Gardner Dec'd

Father's Name: Jacob Baxter Mother's Name: Ann Baxter

Cause of Death: Primary: Consumption (Pulmonary) How long sick: two years

Immediate: Consumption 22a Accident, Suicide, Homicide

Reported by: S. P. Shipman Pastor M. E. Church

Address: Kent Island.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr. Kemp when attended by any of Kent Islands.

The undertaker was

of

Name in Full Frances Glascoe

Certificate of Death

Died at Town Guys County Queen Anne MARYLAND

Date 1899 Month Jan Day 13 Age Y. 36 M. 4 D. -- Native of Washington D.C. Occupation Cook.

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife —

9

Father's Name John Glascoe Mother's Name Lidia Kent

Cause of Death Primary La Grippe, Double Pneumonia How long sick 6 days

Immediate Heart Failure 9 ~~Accident, Suicide, Homicide~~

Reported by Chas. F. Davidson

Address Queenstown, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full | Certificate of Death

Mary Elizabeth Goldsborough

Died at Town: Centreville County: Queen Annes MARYLAND

Date 1899 Month: 1 Day: 1 | Age Y. 69 M. " D. " | Native of: Centreville | Occupetion: House wife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 8

~~Husband~~ Wife of John Goldsborough

Father's Name Mr Tallowfield Mother's Name Mrs Do

Cause of Death: Primary Grippe 9 | How long sick 6 days

Immediate Pulmonary Congestion | ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by J H Holton M D

Address Centreville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Certificate of Death

Minnie Bell Johnson

Died at Town near Queen Anne County Queen Anne MARYLAND

Date 1899 Month Jan Day 18 Age Y. 5 M. 7 D. Native of Md Occupation

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ Number of children living

~~Husband~~ ~~Wife~~ of

Father's Name Henry Johnson

Mother's Name Lizzie Johnson

Cause of Death Primary Croup 8 c

Immediate Suffocation

How long sick 13 hours

~~Accident, Suicide, Homicide~~

Reported by Walter H Fenby M. D.

Address Ruthsburg, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 65968

Name in Full

Certificate of Death

Margaret Horsey McKenney

Died at Town Centreville County Q A Co. MARYLAND

Date 1899 Month Day Jany 6 | Age Y. M. D. 24.7. | Native of Maryland | Occupation Lady

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 1

Husband / Wife of Wm McKenney Jr.

Father's Name Dr. W. H. Meeteer

Mother's Name Meeteer

Cause of Death: Primar "Grippe" 9

Immediate Pneumonia double

How long sick 10 days

~~Accident, Suicide, Homicide~~

Reported by Jas Bordley

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Margaret H. Meeteer

Certificate of Death

Died at Town Centreville County Q A Co MARYLAND

Date 1899 Month Day Jany 12th | Age Y. M. D. 61 | Native of Maryland | Occupation Lady

~~Male~~ | White | ~~Married~~ | Widow | ~~Divorced~~

Female | ~~Colored~~ | ~~Single~~ | ~~Widower~~ | Number of children living 0

~~Husband~~ Wife of Dr. W. H. Meeteer Kent Co. Md

Father's Name — Horsey | Mother's Name — Horsey

Cause of Death: Primar La grippe 9 | How long sick 12 days

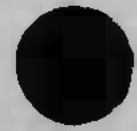
Immediate Pneumonia | ~~Accident, Suicide, Homicide~~

Reported by Jos Bordley

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Mrs Carrie Pippin

Certificate of Death

Died at Town Church Hill County Q. A. MARYLAND

Date 1899 Month 1 Day 21 Age Y. 50 M. D. Native of Maryland Occupation Housekeeper

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ Divorced

Number of children living None

~~Husband~~ ~~Wife~~ of Levi Pippin

Father's Name H. C. McConner Mother's Name 25 e

Cause of Death { Primary Cancer of Breast How long sick 2 yrs

Immediate Exhaustion from Cancerous Cachexia Accident, ~~Suicide, Homicide~~

Reported by J. M. Dorsey M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name in Full | Certificate of Death

Eugene Russum

Died at Town: Near Centreville County: 2 A Co | MARYLAND

Date 1899 Month: Jan Day: 15 | Age Y. M. D.: 5 weeks | Native of | ~~Occupation~~

Male | White | ~~Married~~ | ~~Widow~~ | Divorced

~~Female~~ | ~~Colored~~ | Single | Widower | ~~Number of children living~~

Husband / Wife of

Father's Name: Wm T Russum | Mother's Name: Catherine Russum

Cause of Death: Primary | How long sick: 3 days

Immediate: Convulsions 49 | Accident, Suicide, Homicide

Reported by: M Luther

Address: Dorrison & Whitely

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65058

Name in Full

Certificate of Death

Sarah A Satterfield

Died at Ruthsburg (Town) Queen Anne (County) MARYLAND

Date 1899 Month Jan Day 18 | Age Y. 42 M. 11 D. 17 | Native of Ind | Occupation Housewife

~~Male~~ Female | White | ~~Colored~~ | Married | ~~Single~~ | ~~Widow~~ ~~Widower~~ | Divorced | Number of children living three

~~Husband~~ Wife of Augusta G. Fleetwood

Father's Name Elija Satterfield | Mother's Name Rachael Ander

Cause of Death: Primary Paralysis of right side. 42 | How long sick 6 days

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by Walter H. Temby M. D.

Address Ruthsburg, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, F5068

Name in Full | Certificate of Death

John K. Skinner

Died at Town: Near Wye Mills County: Queen Anne MARYLAND

Date 1899 Month: 1 Day: 2 | Age Y. 76 M. D. | Native of: Maryland | Occupation: Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living: Two

Husband ~~Wife~~ of: A widow Fleetwood.

Father's Name | Mother's Name

Cause of Death: Primary: Old age 141 | How long sick: Two months

Immediate: Liver & Stomach Indigestion | ~~Accident, Suicide, Homicide~~

Reported by: H. R. Hopkins

Address: Wye Mills, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65062

Name in Full — Certificate of Death

Mrs. Margaret Skinner

Died — Town: near Queenstown — County: Queen Anne — MARYLAND

Date 189 — Month: 1 — Day: 9 — Age: Y. M. D. — Native of — Occupetion

~~Male~~ Femele — White / ~~Colored~~ — Married / ~~Single~~ — Widow / ~~Widower~~ — ~~Divorced~~

Number of children living

~~Husband~~ Wife of Wm. Skinner

Father's Name — Mother's Neme

Cause of Death — Primary: Paralysis 44 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Centreville Record

Address 1-14

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78706

Rev. J. H. Fogle, Greenstown,
M. E. C.,

Name in Full George Smith

Certificate of Death

Died at Town Ingleside County 2 A Co. MARYLAND

Date 1894 Month 1 Day 24 Age Y. 16 M. — D. Native of Md. Occupation Labor

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ of

~~Wife~~

Father's Name John Smith

Mother's Name Nancy Collins

Cause of Death Primary Carbuncle 128

Immediate

How long sick 4 Mos.

Accident, Suicide, Homicide

Reported by J K Brown Undertaker

Address Church Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Attended by Dr. J Z Graham
of Ingleside M.D.

Seen by Coroner.
of

Information contained in this certificate received from A. J. Rochester
of Rolphs M.D.

Name in Full Lividia Wilkins

Certificate of Death

Died at Town Ford Shore County Queen Anne's MARYLAND

Date 189 9 Month Jan Day 7 | Age Y. 6 M. 4 D. 22 | Native of Q.A. Co. | Occupation child

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of —

Father's Name James Wilkins | Mother's Name Mary Frances Wilkins

Cause of Death: Primary La Grippe - Double Pneumonia | How long sick 11 days

Immediate Heart Failure | ~~Accident, Suicide, Homicide~~

Reported by Chas F. Davidson

Address [redacted] Queenstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968